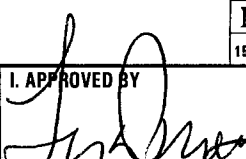


# CONTRACT DATA REQUIREMENTS LIST

Form Approved  
OMB No. 0704-0188

The public reporting burden for this collection of information is estimated to average 440 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN your form to the above address. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.

|   |   |                                      |  |   |  |
|---|---|--------------------------------------|--|---|--|
| <b>A. CONTRACT LINE ITEM NO.</b>  |   | <b>B. EXHIBIT</b>                    |  | <b>C. CATEGORY:</b><br>TDP _____ TM _____ OTHER _____   |  |
| <b>D. SYSTEM/ITEM</b><br>1560-00-970-9943   |   | <b>E. CONTRACT/PR NO.</b>            |  | <b>F. CONTRACTOR</b>                                    |  |
| <b>1. DATA ITEM NO.</b><br>1  | <b>2. TITLE OF DATA ITEM</b><br>CERTIFICATION DATA REPORT |                                      |  | <b>3. SUBTITLE</b><br>COMPLETE PROCESS OPERATION SHEETS |  |
| <b>4. AUTHORITY (Data Acquisition Document No.)</b><br>DI-MISC-80678/T1   |   | <b>5. CONTRACT REFERENCE</b>         |  | <b>6. REQUIRING OFFICE</b><br>DSCR                      |  |
| <b>7. DD 250 REQ</b><br>LT  | <b>9. DIST STATEMENT REQUIRED</b>                         | <b>10. FREQUENCY</b><br>AS REQUIRED  | <b>12. DATE OF FIRST SUBMISSION</b><br>SEE BLOCK #16   |   | <b>14. DISTRIBUTION</b><br><br>a. ADDRESSEE<br>DCMC/ACO<br>DCMC/QAR<br>DSCR-JUT/CAO<br>15. TOTAL → 3 |
| <b>8. APP CODE</b><br>A   |   | <b>11. AS OF DATE</b><br>AS REQUIRED | <b>13. DATE OF SUBSEQUENT SUBMISSION</b><br>SEE BLOCK #16  |   |  |
| <b>16. REMARKS</b><br>PAPA, 10.1, 10.2, 10.2.1, 10.2.2, 10.2.4, 10.5<br>UPON SUBMISSION OF FIRST ARTICLE/PRODUCTION LOT TEST<br>SAMPLES<br>IF PROCESS OPERATION SHEETS CHANGE AFTER SUCCESSFUL<br>COMPLETION OF FAT/PLT |   |                                      |  |   |  |
| <b>1. DATA ITEM NO.</b><br>2  | <b>2. TITLE OF DATA ITEM</b><br>CERTIFICATION DATA REPORT |                                      |  | <b>3. SUBTITLE</b><br>COMPLETE INSPECTION METHOD SHEETS |  |
| <b>4. AUTHORITY (Data Acquisition Document No.)</b><br>DI-MISC-80678/T2   |   | <b>5. CONTRACT REFERENCE</b>         |  | <b>6. REQUIRING OFFICE</b><br>DSCR                      |  |
| <b>7. DD 250 REQ</b><br>LT  | <b>9. DIST STATEMENT REQUIRED</b>                         | <b>10. FREQUENCY</b><br>AS REQUIRED  | <b>12. DATE OF FIRST SUBMISSION</b><br>SEE BLOCK #16   |   | <b>14. DISTRIBUTION</b><br><br>a. ADDRESSEE<br>DCMC/ACO<br>DCMC/QAR<br>DSCR-JUT/CAO<br>15. TOTAL → 3 |
| <b>8. APP CODE</b><br>A   |   | <b>11. AS OF DATE</b><br>AS REQUIRED | <b>13. DATE OF SUBSEQUENT SUBMISSION</b><br>SEE BLOCK #16  |   |  |
| <b>16. REMARKS</b><br>PAPA, 10.1, 10.2, 10.2.1, 10.2.2, 10.2.4, 10.5<br>UPON SUBMISSION OF FIRST ARTICLE/PRODUCTION LOT TEST<br>SAMPLES<br>AT TIME OF CONTRACT COMPLETION   |   |                                      |  |   |  |
| <b>1. DATA ITEM NO.</b><br>3  | <b>2. TITLE OF DATA ITEM</b><br>REQUEST FOR WAIVER        |                                      |  | <b>3. SUBTITLE</b>                                      |  |
| <b>4. AUTHORITY (Data Acquisition Document No.)</b><br>DI-CMAN-80640B   |   | <b>5. CONTRACT REFERENCE</b>         |  | <b>6. REQUIRING OFFICE</b><br>DSCR                      |  |
| <b>7. DD 250 REQ</b><br>LT  | <b>9. DIST STATEMENT REQUIRED</b>                         | <b>10. FREQUENCY</b><br>AS REQUIRED  | <b>12. DATE OF FIRST SUBMISSION</b><br>SEE BLOCK #16   |   | <b>14. DISTRIBUTION</b><br><br>a. ADDRESSEE<br>DCMC/ACO<br>DCMC/QAR<br>DSCR-JUT/CAO<br>15. TOTAL → 3 |
| <b>8. APP CODE</b><br>A   |   | <b>11. AS OF DATE</b><br>AS REQUIRED | <b>13. DATE OF SUBSEQUENT SUBMISSION</b><br>SEE BLOCK #16  |   |  |
| <b>16. REMARKS</b>  |   |                                      |  |   |  |
| <b>1. DATA ITEM NO.</b><br>4  | <b>2. TITLE OF DATA ITEM</b><br>REQUEST FOR DEVIATION     |                                      |  | <b>3. SUBTITLE</b>                                      |  |
| <b>4. AUTHORITY (Data Acquisition Document No.)</b><br>DI-CMAN-80641B   |   | <b>5. CONTRACT REFERENCE</b>         |  | <b>6. REQUIRING OFFICE</b><br>DSCR                      |  |
| <b>7. DD 250 REQ</b><br>LT  | <b>9. DIST STATEMENT REQUIRED</b>                         | <b>10. FREQUENCY</b><br>AS REQUIRED  | <b>12. DATE OF FIRST SUBMISSION</b><br>SEE BLOCK #16   |   | <b>14. DISTRIBUTION</b><br><br>a. ADDRESSEE<br>DCMC/ACO<br>DCMC/QAR<br>DSCR-JUT/CAO<br>15. TOTAL → 3 |
| <b>8. APP CODE</b><br>A   |   | <b>11. AS OF DATE</b><br>AS REQUIRED | <b>13. DATE OF SUBSEQUENT SUBMISSION</b><br>SEE BLOCK #16  |   |  |
| <b>16. REMARKS</b>  |   |                                      |  |   |  |
| <b>G. PREPARED BY</b><br>W. F. FRYE   |   | <b>H. DATE</b><br>4 SEP 2002         | <b>I. APPROVED BY</b><br> |   | <b>J. DATE</b><br>4 SEP 2002   |

17. PRICE GROUP

18. ESTIMATED  
TOTAL PRICE

17. PRICE GROUP

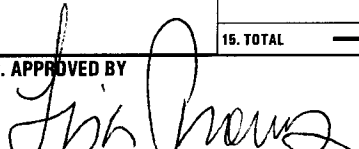
18. ESTIMATED  
TOTAL PRICE

17. PRICE GROUP

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TOTAL PRICE

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|--|---|-------------------------------|---|--|------------------------------------|-----------------------|-------|
| <b>CONTRACT DATA REQUIREMENTS LIST</b><br>(1 Data Item)  |   |                               |   |  | Form Approved<br>OMB No. 0704-0188 |                       |       |
| <small>The public reporting burden for this collection of information is estimated to average 110 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0701-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN your form to the above address. Send completed form to the Government Issuing Contracting Officer for the Contract/PR No. listed in Block E.</small> |   |                               |   |  |                                    |                       |       |
| A. CONTRACT LINE ITEM NO.  |   | B. EXHIBIT                    |   | C. CATEGORY:<br>TDP _____ TM _____ OTHER _____   |                                    |                       |       |
| D. SYSTEM/ITEM<br>1560-00-970-9943   |   |                               | E. CONTRACT/PR NO.                                      |  | F. CONTRACTOR                      |                       |       |
| 1. DATA ITEM NO.<br>5  | 2. TITLE OF DATA ITEM<br>CERTIFICATION DATA/REPORTS |                               |   | 3. SUBTITLE  |                                    |                       |       |
| 4. AUTHORITY (Data Acquisition Document No.)<br>DI-MISC-80678/T3   |   |                               | 5. CONTRACT REFERENCE                                   |  | 6. REQUIRING OFFICE<br>DSCR        |                       |       |
| 7. DD 250 REQ<br>LT  | 9. DIST STATEMENT<br>REQUIRED                       | 10. FREQUENCY<br>AS REQUIRED  | 12. DATE OF FIRST SUBMISSION<br>SEE BLOCK #16*          |  | 14. DISTRIBUTION                   |                       |       |
| 8. APP CODE<br>A   |   | 11. AS OF DATE<br>AS REQUIRED | 13. DATE OF SUBSEQUENT<br>SUBMISSION<br>SEE BLOCK #16** |  | a. ADDRESSEE                       | b. COPIES             |       |
|  |   |                               |   |  |                                    | Draft                 | Final |
|  |   |                               |   |  |                                    | Reg                   | Repro |
| <b>16. REMARKS</b><br>PARA. 10.1, 10.2, 10.2.1, 10.2.2, 10.2.4, 10.5<br><br>P/N 128W10138-13<br>MATERIAL: CR NI MOLY STL SH PER SAE/AMS 6359F<br>HEAT TREAT TO 180,000 PSI MIN. ROCKWELL C40-C43 PER GSS 5.10M<br><br>*UPON SUBMITTAL OF FIRST ARTICLE SAMPLES AND /OR PRODUCTION LT SAMPLES. THESE CERTIFICATIONS ARE REQUIRED AT TIME OF FIRST ARTICLE/PRODUCTION LOT TESTING OR CONTRACT COMPLETION IF TESTING IS WAIVED.<br><br>**REPORTS SHALL BE PROVIDED FOR THE BELOW LISTED SUB-TITLES.<br>CERTIFICATION REPORTS FOR PRIME (OEM) PROCESSES AND MATERIAL SPECIFICATIONS SHALL INCLUDE CERTIFICATION THAT ALL VENDORS PERFORMING THESE PROCESSES ARE PRIME (OEM) APPROVED FOR THEIR SAID PROCESS.   |   |                               |   |  | DCMC/ACO                           | 1                     |       |
|  |   |                               |   |  | DCMC/QAR                           | 1                     |       |
|  |   |                               |   |  | DSCR-JUT/CAO                       | 1                     |       |
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|  |   |                               |   |  |                                    |                       |       |
| 15. TOTAL  |   |                               |   |  |                                    | 3                     |       |
| G. PREPARED BY<br>W. F. FRYE   |   | H. DATE<br>4 SEP 2002         |   | I. APPROVED BY<br> |                                    | J. DATE<br>4 SEP 2002 |       |

|                              |
|------------------------------|
| 17. PRICE GROUP              |
| 18. ESTIMATED<br>TOTAL PRICE |